Centers for Disease Control and Prevention Supplemental Cooperative Agreement

Patient Protection and Affordable Care Act

Funding Opportunity Number: RFA-DP09—90101SUPP10

PROJECT NARRATIVE Executive Summary.

The Massachusetts Tobacco Cessation and Prevention Program (MTCP) proposes to use Affordable Care Act funds to advance the goal of ensuring that all Massachusetts residents have access to effective tobacco cessation resources. MTCP will evaluate, publish, and disseminate reports on surveillance data that were collected in the first four years of implementation of the state's Medicaid (MassHealth) benefit for tobacco cessation. These reports will be used to articulate a rationale for encouraging both public and private insurers in the state to provide tobacco cessation benefits. This plan of action is based upon the knowledge that, as noted in the Request for Applicants, access to tobacco treatment resources via health insurance coverage should lead to increasing numbers of evidence-based quit attempts, and further, that these quit

attempts should lead to decreased tobacco use prevalence within the state.

MTCP has developed three separate strategies, each of which addresses a component part of the issue of a tobacco cessation benefit through health insurance. The first project, the Communications project, is to develop a qualitative report describing the communications strategies and promotions that were targeted to MassHealth members and MassHealth providers to increase their awareness and utilization of the benefit. The second project, the Medicaid project, is a quantitative analysis and report of two MassHealth member data sets concerning utilization of medication(s) benefit and/or the counseling benefit. The third project, the State Employee project, is a quantitative survey and analysis of Massachusetts state employees whose health plans do not include a comprehensive tobacco cessation benefit. These reports will

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provide the evidentiary basis with which to begin to demonstrate to public and private insurers consumer demand for a comprehensive tobacco cessation benefit.

Ultimately, these efforts are consistent with the goals of the Affordable Care Act funding for expanding and enhancing states' plans to reduce tobacco use through legislative, regulatory and educational arenas.

I. Program Infrastructure

MTCP staff and contractors will provide the infrastructure to support the projects outlined in this proposal. MTCP staff will be responsible for project planning and oversight and reporting to the Centers for Disease Control and Prevention (CDC). Contracts with vendors will be expanded in accordance with project plans.

MTCP's Cessation Projects Manager and Contract Manager for the MA Quitline, Anna Landau, will oversee the projects proposed for this funding. Ms. Landau earned a Master's of Public Health (MPH) at John Hopkins University and has five years of experience in tobacco control. The resume of the project manager is included in Appendix A. The MTCP Director of Surveillance and Evaluation, Dr. Thomas Land, will lead the evaluation efforts for the projects proposed. Dr. Land, who has a Doctorate in Mathematical Psychology, will be the primary reviewer of the reports produced by the data analysis vendor. He will guide the interpretation of the data and the writing of future publications that result from these data. Gwendolyn Stewart, MTCP's Director of Communications, will be the primary contact for the writer who will document the communications efforts of MTCP, the state Medicaid agency (MassHealth) and all partner organizations involved with the implementation of the Medicaid benefit. Mark Paskowsky, a Research Analyst with a Master of Public Policy degree from the University of

Michigan, will manage the third project, which concerns the nicotine patches supplied free of charge to state employees in conjunction with state campuses becoming smoke-free in 2009.

Three vendors will be needed to complete this work. First, a technical writer will document and evaluate the promotion efforts of MTCP and MassHealth in 2006 and 2007. Second, a data analysis vendor will develop both an analysis plan and a formal report evaluating a BRFSS data set and the Survey USA data set collected in 2007. Third, a data collection vendor will call back Massachusetts state employees who requested and received the nicotine patch during the implementation of smoke-free state campuses. MTCP will complete these projects within the 24-month funding timeframe. MTCP will contract with proven vendors and partners to accomplish these projects while maintaining the planning and reporting functions at the state level with experienced project managers.

II. Fiscal Management

To ensure compliance with the Affordable Care Act, MTCP will work jointly with the Massachusetts Department of Public Health Budget, Purchase of Service and Accounting Offices under the general guidance of Comptroller's office when establishing grants in MMARS, (Massachusetts Management Accounting and Reporting System). This will include reports that support the distribution, monitoring and performance verification of Affordable Care Act dollars for both the department and any subcontractors. Fiscal management is overseen by Lois Keithly, Program Manager, in concert with fiscal staff, Dazlee Alvarado and Jenna Roberts.

MDPH staff will document all decisions as they relate to the disbursement of funds.

These records must support procurement and contracting, accounting and reporting efforts and document that the decision making process was fair and made in good faith, that targeted and

measurable goals were established, and that funds are fiscally accountable, and - if needed - a recoupment process is in place. These records must be filed and be maintained in a way that will allow for easy retrieval so that they can be reviewed for the purposes of oversight and audit.

III. Media, Communication and Partnerships

MTCP does not plan to expand either paid or earned media with Affordable Care Act funds. No additional media messages will be developed.

MTCP's first project, the Communications project, is to develop a white paper that documents all of the communications and partnership efforts to reach MassHealth members and providers. Massachusetts experienced an unusually high utilization of this benefit; almost 40% (Land, T. et al, 2010) of smokers with MassHealth insurance utilized the benefit over the first two and a half years of its implementation. Many states, national organizations and cities that are recipients of CPPW funds have inquired as to how Massachusetts was able to engage so many MassHealth members. The white paper will provide samples of all communications, the partners' efforts, and will include any quantitative information regarding communications gathered during and after the promotion campaign. The following paid communications will be documented: the transit campaign, the Fight4YourLife campaign, the "MassHealth Covers it Now" campaign, the letters sent to members' homes by the Office of Medicaid, the letters sent to providers' workplaces by the Office of Medicaid, and the paid media promotions placed by the Office of Medicaid. The partner or earned media communications that will be documented include: articles for medical and nursing society newsletters, email announcements to community health centers and safety net providers, presentations at regional MassHealth trainings, fax messages to all providers using the QuitWorks (fax-referral program), and MTCP

web pages. These records, in conjunction with the quantitative findings described in the next section, will inform MTCP's efforts as we engage Commonwealth Care, a state-subsidized insurance program for lower income adults, and the Group Insurance Commission (GIC), the entity that provides health insurance benefits to Massachusetts state employees, about including a cessation benefit in their plans that mirrors the MassHealth benefit.

IV. Recipient Activities-- Health Care Policy and Systems Changes

MTCP's two health care policy projects work toward one aim: toward covering treatment for tobacco use through public and private insurance, including individual, group and telephone counseling and all FDA-approved medications. The first health care policy project, the Medicaid project, is an analysis of two different MassHealth member data sets with accompanying formal report. The second health care policy project, the State Employee project, is an analysis and report of a time-limited, free-patch program for state employees that was available during the implementation of smoke-free state campuses. These two projects build on existing infrastructure in Massachusetts by using BRFSS data and the state's Quitline database, Tobacco Web. These reports will then be used as a platform from which to make the case that sustainable reductions in tobacco use prevalence can be achieved through benefits for tobacco cessation. The article published by MTCP, "Medicaid Coverage for Tobacco Dependence Treatments in Massachusetts and Associated Decreases in Smoking Prevalence" was the first article detailing the evidence of quit outcomes due to the insurance benefit.

For the Medicaid project, MTCP will contract with a vendor to analyze two data sets.

The first data set is a follow-up telephone survey of BRFSS respondents on MassHealth from 2006 and 2007. The second data set is an automated telephone survey collected by Survey USA

in 2007, the first year after implementation of the benefit. Analyses will examine behavior, attitudes, and knowledge of MassHealth members including the type of benefit utilized (e.g. medications or counseling benefit), barriers to benefit use, quit outcomes, and provider interventions. Crosstabs will be conducted by demographic characteristics, chronic conditions including mental health status, and other variables to assess differential impact of the benefit within subpopulations. Finally, the survey instruments themselves will be included so that other state tobacco control programs, state Medicaid agencies, and CDC may consider the adapted questions that MA developed.

The State Employee project is an evaluation of a time-limited, free-patch program for state employees that was available during the implementation of smoke-free state campuses in 2009. This is an important population to evaluate because many employees' insurance does not cover tobacco treatment. The call-backs to these employees will include questions on use of the nicotine patch, use of other support to help with quitting, quit status, and insurance coverage awareness. This information will not only help improve future programs targeted to employees, but it may demonstrate demand for a better state health insurance benefit for tobacco dependence treatment.

Appendix B. shows the tasks and timelines for each of the three proposed projects.

V. Monitoring and Evaluation

Two of the three projects described in this proposal are evaluation projects, while the third is qualitative in nature. As such, MTCP has not submitted a traditional evaluation plan accompanying this proposal. Rather, MTCP documented how the projects are evaluative and

then noted the output and outcome measures for this proposal as well as how the findings from these reports will be used.

The Medicaid project involves analysis of surveillance data and a final report documenting MTCP's experience with monitoring the utilization of the benefit while also documenting the long-term quit outcomes of residents. The State Employee project involves analysis of surveillance data with the aim of documenting participation in a free patch project and documenting of long-term quit status. While the Communications project is not evaluative, it is meant to serve the purpose of a historical record and as a template for other state tobacco programs that are now or soon may be involved in negotiations on benefit design planning and implementation with their states' Medicaid agencies. The output measures for this proposal then include the completion of two quantitative analyses and one qualitative analysis, completion of three written reports, and dissemination of the three reports to relevant stakeholders within Massachusetts and nationally. The outcome measure(s) for this project include monitoring whether any public or private Massachusetts health plans change or take steps toward changing their coverage of tobacco cessation.

All three reports are meant to enable MTCP to partner with relevant stakeholders who can engage decision-makers that will help ensure that all residents have access to effective tobacco cessation resources. Those MTCP has already included in the dissemination plan include: the Division of Health Care Finance and Policy (DHCFP) within Massachusetts; health plans, both public and private, operating in Massachusetts; MassHealth; advocacy organizations locally, such as Tobacco Free Mass; and national advocacy groups including Partnership for Prevention, American Lung Association, American Cancer Association, and American Heart Association.

The MTCP Director is committed to using evaluation data to drive program planning.

Lessons learned from this work will be documented, and the final evaluation report will inform the strategic direction that MTCP takes to encourage public and private payors to provide tobacco cessation benefits.

MTCP evaluation staff will attend the annual surveillance and evaluation meeting and participate in CDC technical assistance webinars to both improve our analytic capabilities and inform the CDC of project outcomes.

VI. Participate in CDC Training Activities

MTCP will pay for travel for up to two employees to attend the two CDC-sponsored training meetings during the funding period. It is expected that either the Massachusetts Tobacco Control Program Manager, Dr. Keithly, will attend the CDC trainings along with Anna Landau. MTCP will provide funds for staff to participate in peer-to-peer learning opportunities. Further, MTCP receives numerous requests to speak to grantees of Partners for Prevention, speak on CDC Program Manager phone calls, and at other national conferences.

VII. Budget and Budget Justification

See separate attachment.

Citation:

Land T, et al. (2010) Medicaid Coverage for Tobacco Dependence Treatments in Massachusetts and Associated Decreases in Smoking Prevalence. PLoS ONE 5(3): e9770. doi:10.1371/journal.pone.0009770